SEC Mail
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Section

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

AUG 2 B 2008

FORM D

Weshington, DC 105

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
NIFORM LIMITED OFFERING EXEMPTION

1703-180
OMB Approval
OMB Number: 3235-0076
Expires: August 31, 2008
Estimated average burden

hours per response...... 16.00

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SEC USE ONLY	
Prefix	Serial
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DATE RECEIVED	
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UNIFORM LIMITED OFFERING EXEMPT	ION
Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)	
Promissory notes convertible into common stock issuable upon conversion thereof	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing: □ Amendment	<u> </u>
A. BASIC IDENTIFICATION DA	ГА
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
RED ROOM OMNIMEDIA CORPORATION	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
414 GOUGH STREET, SUITE 2, SAN FRANCISCO, CA 94102	(415) 822-1922
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) same as above	
Brief Description of Business	
ONLINE SERVICE BUSINESS FOR MEDIA	
Type of Business Organization	
corporation limited partnership, already formed other (please specify)	CERTALI BENTATUL BONDI ENIT HALI BENTAHAN BONDI BONDA
business trust limited partnership, to be formed Limited liability company	
Actual or Estimated Date of Incorporation or Organization: Month Year	stimated
	((BB(I) PPret (BIII BPIP) GIII BIII BIII
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta	te; 08059010
CN for Canada; FN for other foreign jurisdiction) C A GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 23	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date	
address.	t it was maned by Chiles States registered of certified high to that
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not man	mally signed must be photocopies of the manually signed copy or bear

ATTENTION

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure To file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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typed or printed signatures.

notice and must be completed.

Filing Fee: There is no federal filing fee.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of
the issuer;
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
• Each general and managing partner of partnership issuers
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Madison, Ivory
Business or Residence Address (Number and Street, City, State, Zip Code)
414 Gough Street, Suite 2, San Francisco, CA 94102
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Mertens, Abraham
Business or Residence Address (Number and Street, City, State, Zip Code)
414 Gough Street, Suite 2, San Francisco, CA 94102
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Newman, Sandra L.
Business or Residence Address (Number and Street, City, State, Zip Code)
414 Gough Street, Suite 2, San Francisco, CA 94102
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Bolton, Wendy
Business or Residence Address (Number and Street, City, State, Zip Code)
414 Gough Street, Suite 2, San Francisco, CA 94102
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
business of Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Tun Name (Last name tits), it individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Dustiness of Residence Address (Namber and Survey, State, 25p Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
, (·,,
Business or Residence Address (Number and Street, City, State, Zip Code)
[need address]
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Charle Day (set) that Area has D. Brewster D. Day Goid Owner D. D. C.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Dustriess of Residence Address (Municer and Street, City, State, Elp Code)

(Use blank sheet, or copy and use additional copies of this sheet as necessary)

					R. INFO	TRMAT	ION AF	OUT O	FFERIN	IG.			
	Yes No 1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?												
Answer also in Appendix, Column 2, if filing under ULOE 2. What is the minimum investment that will be accepted from any individual?										\$N/A			
3.													
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)													
Full Nar	ne (Last n	ame first,	if individ	ual)									
Busines	s or Resid	ence Addi	ress (Num	ber and St	reet, City,	State, Zip	Code)						
Name o	f Associate	ed Broker	or Dealer										
	Which Po												All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Nar	ne (Last n	ame first,	if individ	ual)		·							
Busines	s or Resid	ence Addi	ress (Num	ber and St	reet, City,	State, Zir	Code)						
Name o	f Associate	ed Broker	or Dealer								•		· · · · · · · · · · · · · · · · · · ·
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Full Nar	ne (Last n	ame first,	if individ	ual)									
Busines	s or Resid	ence Addr	ress (Num	ber and St	reet, City,	State, Zir	Code)						
Name of	f Associate	ed Broker	or Dealer	 	·						<u> </u>		······································
	Which Po							••••••			•••••	•••••	All States
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(Use blank sheet, or copy and use additional copies of this sheet as necessary)

box	Enter the aggregate offering price of securities included in this offering and the total amount dy sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this and indicate in the column below the amounts of the securities offered for exchange and already anged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	<u> </u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$125,000.00	\$ 125,000.00
	Partnership Interests	\$	\$
	Other (Specify: Interests in Statutory Business Trust)	\$	\$
	Total	\$125,000.00	\$ 125,000.00
2.	Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ 25,000.00
	Non-accredited Investors	1	\$ 100,000.00
	Total (for filing under Rule 504 only)	2	\$ 125,000.00
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	lacktriangle	\$ 1,000.00
	Accounting Fees		\$
	Engineering Fees		S
	Sales Commissions (Specify finder's fees separately)		\$
	Other Expenses (identify): Blue Sky Fees	\boxtimes	\$ 50.00
	Total	⊠	\$ 1,050.00

C. OFFERING PRICE, NO. OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b.	Enter the difference between the aggregate offering price given in restotal expenses furnished in response to Part C-Question 4.a. This opposeds to the issuer."	difference is the "adjusted gross			s	123,950.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer each of the purposes shown. If the amount for any purpose is not know the box to the left of the estimate. The total of the payments listed proceeds to the issuer set forth in response to Part C-Question 4.b. above	vn, furnish an estimate and check d must equal the adjusted gross				
				Payments to Officers, Directors, & Affiliates	Pa	ayments To Others
	Salaries and Fees			<u>\$</u> □	\$	
	Purchase of real estate			<u>\$</u>	\$	
	Purchase, rental or leasing and installation of machinery and equip	ment		<u>\$</u> □	\$	
	Construction or leasing of plant buildings and facilities	***************************************		<u>\$</u>	\$	
	Acquisition of other businesses (including the value of securities in be used in exchange for the assets or securities of another issuer pu	nvolved in this offering that may ursuant to a merger		<u>\$</u>	<u>\$</u>	
	Repayment of indebtedness			<u>\$</u>	\$	<u>. </u>
	Working Capital			\$ \	\$12 :	2,950.00
	Other (specify)	***************************************		<u>\$</u>	<u>\$</u>	
	Column Totals	•••••••••••		<u>\$</u>	§ 12:	2,950.00
The	D. FEDERA issuer has duly caused this notice to be signed by the undersigned duly	AL SIGNATURE authorized person. If this notice	is file	ed under Rule 505, the	follow	ing signature
con	stitutes an undertaking by the issuer to furnish to the U.S. Securities ished by the issuer to any non-accredited investor pursuant to paragraph	and Exchange Commission, upon (b)(2) of Rule 502.				
	er (Print or Type)	Signature	7	Date		/
	Room Omnimedia Corporation			um 8.	25	-08
	ne of Signer (Print or Type)	Title of Signer (Print or Type) President				
100	ry Madison	rresident		· · · · · · · · · · · · · · · · · · ·		
		ENTION		-i-l-4: (S	10 T	16.6
	Intentional misstatements or omissions of fact co	onstitute federal crimit 001.)	iai V	violations. (566	19 (7.3.C.

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes □ No ☒

See Appendix, Column 5, for state response

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Red Room Omnimedia Corporation	Signature Malicon 8-25-08
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Ivory Madison	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2	 ;	3	4					5	
	Intend to non-acc investors (Part B-	redited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of Investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Promissory notes convertible into common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No	
AL	 	ļ					-		 	
AK AZ		 								
AR							†			
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TX							<u> </u>	-		
UT						 				
VT										
VA										

APPENDIX

1	non-ac investor	to sell to ceredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		un ULA attach of wai	5 Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Promissory notes convertible into common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
WA					1		11111111111		1.7.7.
wv		-					1	1	1
Wi									
WY	<u> </u>	1							
PR					<u> </u>				

